

Right-to-Know Request Form

Franklin County, Pennsylvania

Borough of Greencastle 60 N. Washington Street Greencastle, PA 17225 717-597-7143/FAX: 717-597-1022 www.greencastlepa.gov

Date: Click here to enter text.

Request submitted via: ☐ Email ☐ US Mail ☐ FAX ☐ In Person
Name of applicant:Click here to enter text.
Address: Click here to enter text.
Phone: Click here to enter text.
Records Requested (provide as much specific detail as possible so the Borough can identify the information:
Click here to enter text.
Do you want copies? \square Yes \square No
\square Yes, electronic copies.
\square Yes, printed copies.
\square No, in person inspection of records preferred (may request copies later).
\Box Certified copies (may be additional costs).
File Number: Date received: Response due (5 business days):
Request was:
Please notify me if fees associated with this request will be more than \$100. ☐ Yes ☐ No
☐ Appropriate third parties notified and given an opportunity to object to the release of requested records.

Public bodies may file anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written request need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)